Please submit your \$75.00 Fee to the Recreation Department 90 Days prior to the Event Date City of Bethlehem Attention: Recreation Department 10 East Church Street Bethlehem, PA 18018 Email: EventApp@bethlehem-pa.gov	C+ # Permit Issued//	Special Events Application- REVISED 02/11/19
90 Days prior to the Event Date City of Bethlehem Attention: Recreation Department 10 East Church Street Bethlehem. PA 18018 Email: EventApp@bethlehem.pa.gov	SPECIAL EVENT APPLICATION	Application Submitted / /
NINETY (90) days prior to your event date. A map of the site and/or route must, be submitted with application. Please keep in mind that submitting an application and eleposit of non-refundable application fee in no way to be construed as approval or confirmation of your event. Your application will not be reviewed until your non-refundable application fee and site map are received. Event Date: First Choice	90 Days prior to the Event Date City of Bethlehem Attention: Recreation Department 10 East Church Street Bethlehem, PA 18018	Check #
Fireworks * Hall/Full Marathon Celebration Parking Lot/Street Celebration(Private Event) Parade Festival Street Race/5K Film Shoot Walk/Run on Public Property or Sidewalks (circle one) Other (Please Specify): Special Effects* (Fire Twirling, Pyrotechnics, Welding, any type of open flame) **Fire Permit will be required, please contact the Fire Department 610-865-7143 Yes No Is this an annual event? If so, how many years have you been holding the event? Parades, Walks, runs, Film Shoot must submit a route with written turn by turn and map must be attached to this application. Times for Each Event Date	NINETY (90) days prior to your event date. A map of the site and/or rou keep in mind that submitting an application, and deposit of non-refuce construed as approval or confirmation of your event. Your application	ute <u>must</u> be submitted with application. Please ndable application fee is in no way to be
Event Location (Include Site Name or Address): Event Category (Check all that apply)	Event Date: First Choice Second	d Chaice
Event Category (Check all that apply) Fireworks *	Event Description: Example: raising money for X Charity or X Awareness-place provide	le a detailed description here.
Event Category (Check all that apply) Fireworks *		
Fireworks * Hall/Full Marathon Celebration Parking Lot/Street Celebration(Private Event) Parade Festival Street Race/5K Film Shoot Walk/Run on Public Property or Sidewalks (circle one) Other (Please Specify): Special Effects* (Fire Twirling, Pyrotechnics, Welding, any type of open flame) **Fire Permit will be required, please contact the Fire Department 610-865-7143 Yes No Is this an annual event? If so, how many years have you been holding the event? Parades, Walks, runs, Film Shoot must submit a route with written turn by turn and map must be attached to this application. Times for Each Event Date	Event Location (Include Site Name or Address):	
Parade Festival Street Race/5K Film Shoot Walk/Run on Public Property or Sidewalks (circle one) Other (Please Specify): Special Effects* (Fire Twirling, Pyrotechnics, Welding, any type of open flame) *Fire Permit will be required, please contact the Fire Department 610-865-7143 Yes No Is this an annual event? If so, how many years have you been holding the event?		tapply)
Other (Please Specify):	☐ Fireworks * ☐ Half/Full Marathon ☐ Celebration ☐ Park	ing Lot/Street Celebration(Private Event)
*Fire Permit will be required, please contact the Fire Department 610-865-7143 Yes	□ Parade □ Festival □ Street Race/5K □ Film Shoot □ Walk/Run on F	Public Property or Sidewalks (circle one)
Yes No Is this an annual event? If so, how many years have you been holding the event? Parades, Walks, runs, Film Shoot must submit a route with written turn by turn and map must be attached to this application. Times for Each Event Date	☐ Other (Please Specify): ☐ Special Effects* (Fire Twirling	g, Pyrotechnics, Welding, any type of open flame)
Parades, Walks, runs, Film Shoot must submit a route with written turn by turn and map must be attached to this application. Times for Each Event Date Event Start: Day 1: Day 2: Day3: Event End: Day 1: Day 2: Day 3: Start Time of Walk/Run/Race: Estimated Participants Estimated Spectators	· · · · ·	•
Times for Each Event Date Event Start: Day 1: Day 2: Day3: Event End: Day 1: Day 2: Day 3: Start Time of Wallk/Run/Race: Estimated Participants Estimated Spectators Estimated Participants Estimated Participants Estimated Participants Estimated Participants Estimated Participants Estimated Participants Estimated Spectators	237	
Event Start: Day 1: Day 2: Day3: Event End: Day 1: Day 2: Day 3: Start Time of Walk/Rurs/Race: Estimated Participants Estimated Spectators Eyes		
Set Up: Day 1: Day 2: Day3: Clean Up: Day 1: Day 2: Day 3: Start Time of Walk/Run/Race: Estimated Participants Estimated Spectators GYes		
Estimated Participants	· · · · · · · · · · · · · · · · · · ·	
Estimated Participants Estimated Spectators		p: Day 1: Day 2: Day 3:
□Yes □No Are admission, entry, or participation fees required? If yes, provide amounts □Yes □No Are vendor or other fees required? If yes, provide detailed amounts □Yes □No Are you selling merchandise? If yes, you need to contact the City of Bethlehem Tax Bureau and complete a Business Registration form. Organization Name: □Street Address: □City:		etimated Specializa
□Yes □No Are vendor or other fees required? If yes, provide detailed amounts		
Organization Name: City: State: State: Cell Phone: Host Approval Name: Date: Are you selling merchandise? If yes, you need to contact the City of Bethlehem Tax Bureau and complete a Business Registration form. Street Address: State: E-mail Address: Date:	☐Yes ☐No Are admission, entry, or participation fees required? If yes, prov	vide amounts
Complete a Business Registration form. Organization Name:	□Yes □No Are vendor or other fees required? If yes, provide detailed amo	ounts
Street Address:		Ity of Bethlehem Tax Bureau and
Street Address:	Organization Name:	
City:		
Cell Phone: E-mail Address: Host Approval Name: Date:		
Host Approval Name: Date:		
	•	<u> </u>



C+ #	Permit Issued	/ /	Special Events Application
Applicant Information	Resident and Control	ACCORDANGE TO SHEET	
Organization Name:			
Applicant Name (Main Conta	ect):		
			Zip:
E-mail Address :			
Site Map	ATTACHED		
A site plan or route map (Goo		ith this application (Re	equired for approval of event and permit)
	submit a route map with writtering tents, structures or a stage?		attached to this application. ate on site map (please show size and location)
Size?	(may not be in	street or staked into th	ne ground) Please show on site map.
Medical Plan			ted &Attached 🗆
Include location of First Aid a	and Medical Services in your eve	ent site map/route plar	٦.
Please describe your medica deployed:	ıl plan and types of resources th	nat will be at your ever	nt and the manner in which they will be managed and
*If event has 5000 or more the	ian attendees a PA Special Eve	ent Plan is Required 6	0 days prior to the event. (See EMS Appendix)
NOTE: The City of Bethleher services requirements.	n's EMS has the Right of First	Refusal and final aut	hority to determine and provide your event medical
Electricity	NA 🗆	Comple	ted &Attached 🗆
Electricity is limited and only Bethlehem Website- Bethleh	available in certain locations. Pl		ubmit the Electrical appendix located on the City of
What are you using electricit	y for?		
☐Yes ☐No Have you	ı indicated on your Site Map the	location of the reques	sted electricity?
Existing city maintained lightidate and time. It is suggested	ing and outlet circuits may not b	e used for event power ource, i.e. a generator	er use unless approval is obtained before the event Electrical outlets are limited and not guaranteed to
Music and Amplified Sou			eted 🗆
If Yes, applicant shall indeperapplicant must obtain a licent music licensing companies at Bethlehem in connection with for same if advanced by City	se to present live or recorded mand agents if a license is require by your event, applicant agrees to	nsing companies and nusic at the event. App d. Should any music t hat it is contractually t	agents (typically BMI, ASCAP, SESAC) whether blicant shall pay all fees, costs and fines payable to icensing fees, costs or fines be charged to the City or iable to pay said fees, costs or fines or indemnify Cityent?
Amplified Sound will be used	: Start Time		End Time
·	Map the location of any stages, s	cound eveteme, and di	· · · · · · · · · · · · · · · · · · ·
Security	NA L		ted &Attached □
The Bethlehem Police Depar all matters involving safety a	tment will have final approval or	n the security compan	ies used for events, and the final decision in
	application does not automati sources and staff with each o		ources or staff. It is your responsibility <i>to</i>
Street Closures	ATTACHED 🗆		
Street Closure times:			
Public Works Traffic Burea	u and the Police Department.	Please note that state	al must be reviewed by the City of Bethlehem e roads that require closure also need a permit e describe your Closure Plan and/or Route:
REMEMBER THAT COMPLET	TION OF THIS APPLICATION DO	DES NOT APPROVE YO	DUREVENT.



C+ #		Permit Issued		/	Special Events Application
Vendors	NA 🗆	ENGLIS NOW HISTORY	SEE ATT	ACHED	
					s Privilege License and proper insurance. All
					ons a minimum of 2 weeks prior to the event.
					creation Bureau, the following departments have
100 0.000	*				DAYS prior to the event date.
□ Yes □No	•		rages? If Y	ES, please d	lescribe the type of food you will have available:
	"A Health License	e fee may be required			
□ Yes □No	Do you intend to c	ook and/or keep warm f	ood at the e	event? *A Fin	e Review fee will be required
Yes No	Mill the worder of	tun in the Bight of Mou	2 (Chant C	idowolk or Di	ONA!) *A Engineering Resmit fee may be required
			r (Street, S	idewalk of Re	OW) *A Engineering Permit fee may be required
	ooms		419.56.023	in Alberta	ferens etternes att viter andvorumen er stete ellevoriblere
percent of these	facilities must be Al		ent is espec	ially large or	g the event. Federal guidelines require five (5%) lasts more than one day, the restroom will need to must be provided.
Portable Restroc	om Company:			Contac	ct Name:
1					
			•		k-Up: Date:Time:
Pecycling and	Cloan un Plan	MUST ATTA	СП	PARTITION OF	
				rochogo eo i	he area is returned to a place condition. Eathers to
properly cleanup	will result in additio		in a denial	of future ever	he area is returned to a clean condition. Failure to nt permits. Event organizers, attendees and vendors ontainers.
recycling bin will replacement cos	il be necessary for it. Based on the att	the equipment. Any k	oss or dan of your eve	nage to the	events. A security deposit of \$50 per clearstream containers will be billed to you after the event at s with lids may be required. The City of Bethlehem
Recycling and §	<u> Sanitation Plan</u> : H	ow many containers are	needed fo	r your event	Recycling:
☐ Organizer will provide own containers ☐ Contract with hauler. Please include copy of contract					
-174	•				ducts Other
l	·		•		
vvnat will be colle	cted from the vena	ors: U Cans and Bottles	□ Paper/	Cardboard Pi	roducts Other
Clean-up Plan:	please describe you	ır clean-up plan below, i	nclude num	iber of volunt	teers, and plan for discarding the trash/recycling etc.
Water	A TABLE	NA 🗆		EN STATE	
Are you intendin	g to use hydrants o	r public water connection	ns? If yes, p	lease provid	e specific locations.
Use of hydrant o	r public water requir	es a Permit from the Wi	ater Sewer	Resources D	Department 610-865-7076.
Alcohol		NA 🗆		Myrain Saw	
Authorization a	nd Insurance: Do	you plan to offer alcoho	olic beveraç	jes <u>for sale</u> :	at your event?
		nust receive authorization ce requirements for liquo			the State of Pennsylvania Liquor Control Board
□ Yes □ No Do	you plan to serve/fi	umish alcoholic beverag	es <u>free of</u>	<u>charge</u> at yo	ur event?
If yes, the following apply: (1) You must receive authorization from City Council if your event is to be conducted in a "Public Place" as defined in City of Bethlehem Article 723; (2) See the notice of insurance requirements for liquor liability insurance; (3) If you intend to serve alcohol free of charge at your event, the provision of alcohol shall not be conditioned upon (i) the purchase of a ticket for admission to the event; (ii) in exchange for a donation or other fee; (iii) a required purchase or payment that would constitute a sale of alcohol under Pennsylvania Liquor Code.					
Please describe y	our security and car	ding planning to ensure	the safe sa	le of serving	/furnishing of alcohol at your event:
	ehem Police Departr nol is sold or served.	_	o have the	final decision	regarding the security presence needed at any
Bethlehem Parl	king Authority	□Approved	Tree State		
		d Zone? Yes-Bethleher	n Parking A	uthority appr	roval required.*Additional fees apply
Signature:			Date:		

Insurance Requirements

Before a permit will be issued, you will need to provide proof of the following insurance coverage:

- General Liability Insurance in the minimum amount of \$1,000,000 that names the "City of Bethlehem, its officers and employees"
 as additional insured. You must provide a certificate of insurance from a licensed insurance agent or the insurer, evidencing the
 required coverage, to Judy Stiles Parks Department.
- If you intend to serve alcohol free of charge or to sell alcohol as authorized by City Council under a Use Permit for Public Property, you shall (1) obtain either a liquor liability insurance policy, or a special event liability insurance policy including host liquor liability insurance coverage, or a general liability policy including host liquor liability insurance coverage, that satisfies coverage limits specified by the City, names the "City of Bethlehem", its officers and employees" as additional insured's, and is scheduled in force for the duration of the event; (2) provide a certificate of insurance from a licensed insurance agent or the insurer, evidencing the required coverage, to the City of Bethlehem Law Bureau.

Permits will not be issued until all insurance requirements have been received, verified and approved by the City of Bethlehem Law Bureau. If insurance is at any time determined non-compliant in the judgment of the Director of Parks & Public Property, a Permit can be rejected or revoked without advance notice. Please contact the Bethlehem Law Bureau with any questions pertaining to insurance.

- Please Note the following additional Instructions:
 Insurance coverage must be maintained for the duration of the event including setup and cleanup dates. The date(s) of your event must be stated on your insurance coverage.
- The Certificate Holder is: City of Bethlehem, 10 E Church St., Bethlehem, PA 18018
- All required Insurance Certificates must be accompanied by the additional insured endorsement form with the required language or they will be rejected as non-compliant.
- All required Insurance Certificates must be submitted no later than thirty (30) days prior to the commencement of the event.

Property Damage

The Permittee and any person responsible for causing equipment or property damage to the licensed premises or City property or equipment are jointly liable to the City for its costs to repair, replace, restore or clean the property damage. The Permittee's liability hereunder arises contractually and regardless of fault.

Affidavit of Application

The applicant, and if applicable, the professional event contact, must complete, sign, and date this application and submit application fee to: City of Bethlehem, Parks & Recreation Office, 10 E Church St. Bethlehem, PA 18018 Phone: 610-865-7079. Applications may be faxed to 610-865-7312, or emailed to EventApp@bethlehem-pa.gov; however until non-refundable application fee is received, the application will not be reviewed.

I warrant the following with full authority to bind the applicant, also the "organization," I hereby certify the foregoing statements to be true and correct. Applicant agrees to indemnify and hold harmless the City of Bethlehem, its Mayor, City Council, Officers, Agents, Employees from and against any and all losses, damages, liability, claims, suits, costs, taxes, fees, fines and expenses whatsoever, and music licensing fees, costs and fines charged to the City, also including attorney's fees, regardless of the merit or outcome of any such claim or suit arising from or in any manner connected to the permitted event. In the event that a possessory interest subject to properly taxation is created by this use permit, I agree to pay all possessory interest taxes and the city shall not be liable for the payment of such taxes. I further agree that the payment of any such taxes shall not reduce any consideration paid the city pursuant to this use permit. I certify that I, on behalf of the applicant, am also authorized to bind the organization to be financially responsible for any costs and fees that may be incurred by or on behalf of the event to the City of Bethlehem. Applicant agrees to comply with all permit conditions and rules, including those listed in the special event planning guide and other documents provided by city representatives and understands that failure to comply with any conditions or any violation of law may result in the immediate cancellation of the event, denial of future events and/or criminal prosecution.

Additional Items to be considered by Applicant

Item	Bureau/Phone Number	Item	Bureau/Phone Number	Item	Bureau/Phone Number
Location Availability (Park)	Recreation 610-865-7081	Sidewalk/Street Usage	Engineering 610-865-7063	Water/Hydrant	Water 610-865-7076
Police/Security	Police Department 610-865-7187	Petting Zoo/Animal Display	Health 610-865-7083	Barricades/Road Closures	Traffic 610-997-7960
Recycling	Recycling 610-865-7082	Street Cleaning	Streets 610-865-7136	Electricity	Electrical 610-865-7108
Tents, Structures & Stages	Code Enforcement 610-865-7091	Restrooms	Recreation 610-865-7081	Law Bureau	Law Bureau 610-865-7012
Food Service	Health 610 -865-7083	Sewage Disposal	WWTP 610-865-7169	Ambulance	EMS 610-865-7111
Retail Sales	Tax 610 -865-7022	Fire (Roster)	Fire 610-865-7143	Meter or Permit Parking Areas	BPA 610-865-7123

Applicant Name (Print)	
Signature	Date
Property Owner of Parcel:	